-	y): [x] Rule 504 [] Rule 505 [] Rule 506 [] S	ection 4(6) [] ULOE
Name of Offering ([] check if this in Diamond A Investors, L.P.: Offering of	s an amendment and name has changed, and indicate ch	ange.)
		155 DATE RECEIVED
	UNIFORM LIMITED OFFERING EXEMPTION	2002
02039999	PURSUANT TO REGULATION D, SECTION 4(6), AND/OR	I 1 200 Prefix Seria
The state of the s	NOTICE OF SALE OF SECURITIES	
	FORM D	RECEIVED CONTROL 16.00
	Madified Die 20313	Estimated average burde
	SECURITIES AND EXCHANGE COMMISSION WASHINGTON, D.C. 20549	OMB Number: 3235-0076 Expires:August 31, 1998
•	UNITED STATES	OMB APPROVAL

Enter the information requested about the issuer

Name of Issuer ([] check if this is an amendment and name has changed, and indicate change.) Diamond A Investors, L.P.

Address of Executive Offices (Number and Street, City, State, ZIP Code) One Sansome Street, Suite 3900, San Francisco, California, 94104

Telephone Number (Including Area Code) (415) 288-2330

44441

Address of Principal Business Operations (Number and Street, City, State, ZIP Code)

Telephone Number (Including Area Code)

Operations (if different from Executive Offices)

Same as executive offices.

Brief Description of Business securities investment

PROCESSED

Type of Business Organization

[] corporation

[x] limited partnership, already formed [] limited partnership, to be formed [] business trust

[] other (please specify):

JUN 2 5 2002

THOMSON FINANCIAL

Month Year

Actual or Estimated Date of Incorporation or Organization: [0][1] [9][3] [x]Actual []Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service

abbreviation for State: CN for Canada;

FN for other foreign jurisdiction)

[C] [A]

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC. Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

-ATTENTION-

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond un less the form displays a currently valid OMB control number.

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A. BASIC IDENTIFICATION DATA

- Enter the information requested for the following:
 - * Each promoter of the issuer, if the issuer has been organized within the past five years;
 - * Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - * Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - \star $\;$ Each general and managing partner of partnership issuers.

Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer	[] Director	<pre>[x] General and/or Managing Partner</pre>
Full Name (Last name first, if individual) Lawndale Capital Management, LLC		
Business or Residence Address (Number and Street, City, State, ZIP Code): One Sansome Street, Suite 3900, San Francisco, California 94104		
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [x] Executive Officer	[] Director	[] General and/or Managing Partner
Full Name (Last name first, if individual) Shapiro, Andrew E. (LLC Manager)		
Business or Residence Address (Number and Street, City, State, ZIP Code): One Sansome Street, Suite 3900, San Francisco, California 94104		
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer	[] Director	[] General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, ZIP Code):		·
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer	[] Director	[] General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, ZIP Code):		
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer	[] Director	[] General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, ZIP Code):		
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer	[] Director	[] General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, ZIP Code):		
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer	[] Director	[] General and/or Managing Partner
Full Name (Last name first, if individual)	·	
Business or Residence Address (Number and Street, City, State, ZIP Code):		

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				в	INFORMATION	ABOUT OF	PERING					
	s the issue vestors in										[o]	
	Answer	also in Ap	pendix, Co	lumn 2, if	f filing un	der ULOE.						
	nat is the material The Genera				-	_				\$50,000.0	*0*	
			_		_				•		To O	
3. Do	es the offe	ring permi	t joint ow	mership of	f a single	unit?				[x] [1	
o a	Inter the incommission of fering. Ind/or with	er similar If a persor a state or	remunerati to be lis states, l	on for sol ted is an ist the na	licitation associated ame of the	of purchas person on broker or	sers in con agent of dealer. I	nnection wi a broker o If more tha	th sales o r dealer r in five (5)	f securití egistered persons t	es in the with the S o be liste	EC
Full N	ame (Last n	ame first,	if indivi	dual)								
						*						
Busine	ss or Resid	lence Addre	ess (Number	and Stree	et, City, S	tate, ZIP	Code)					· · · · · · · · · · · · · · · · · · ·
Name o	f Associate	d Broker o	or Dealer		·							
States	in Which P	erson List	ed Has Sol	icited or	Intends to	Solicit I	urchasers					
(0	heck "All S	tates" or	check indi	vidual Sta	ates)					[] Al	l States	
												(***)
[AL]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA]	[CO] [LA]	[CT] [ME]	[DE] (MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	(SC)	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full N	ame (Last n	ame first,	if indivi	dual)	i							
Busine	ss or Resid	ence Addre	ss (Number	and Stree	et, City, S	tate, ZIP	Code)					
Name o	f Associate	d Broker o	or Dealer			· · · · · · · · · · · · · · · · · · ·			·			
States	in Which P	erson List	ed Has Sol	icited or	Intends to	Solicit F	urchasers					
(C	heck "All S	tates" or	check indi	vidual Sta	ites)				• • • • • • • • • • • • • • • • • • • •	[] Al	l States	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT] [RI]	[NE] [SC]	[NV]	[NH] [TN]	[NJ] [TX]	(MM) [UT]	[YY] [VT]	[NC] [VA]	[ND] [WA]	[WV]	[OK]	(OR) [WY]	[PA] [PR]
	ame (Last n											
Busine	ss or Resid	ence Addre	ss (Number	and Stree	ot City S	tate ZIP	Code)				·	
					.0, 010,, 0	5455, 225						
Name o	f Associate	d Broker c	r Dealer		····				· · · · · · · · · · · · · · · · · · ·			,,,
States	in Which P	erson List	ed Has Sol	icited or	Intends to	Solicit F	urchasers					
	heck "All S									[] Al	l States	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
(IL)	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[HO]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EX	PENSES AND USE OF	PROCEEDS
1.	Enter the aggregate offering price of securities included in this	offering and the	e total amount already sold. Enter "0"
	if answer is "none" or "zero." If the transaction is an exchange	e offering, check	this box [] and indicate in the
	columns below the amounts of the securities offered for exchange		
	•	Aggregate	Amount Already
	Type of Security	Offering Price	Sold
	Debt		\$0.00
			\$0.00
	Equity	\$0.00	\$0.00
	[] Common [] Profession		
	[] Common [] Preferred		
	Gammantilla Gamminian (including commune)		*
	Convertible Securities (including warrants)		\$
	Partnership Interests		\$0.00
	Other (Specify)	\$_N/A	\$ <u>N/A</u>
		** *** ***	40.00
	Total	\$1,000,000.00	\$0.00
	Answer also in Appendix, Column 3, if filing under	ULOE.	
2.	Enter the number of accredited and non-accredited investors who h	-	5
	aggregate dollar amounts of their purchases. For offerings under	Rule 504, indica	ate the number of persons who have
	purchased securities and the aggregate dollar amount of their pur	chases on the tot	tal lines. Enter "O" if answer is
	"none" or "zero."		
			Aggregate
		Number	Dollar Amount
		Investors	of Purchases
	Accredited Investors	0	\$0.00
	Non-accredited Investors		\$0.00

	Total (for filings under Rule 504 only)	0	\$00.00
			,
	Answer also in Appendix, Column 4, if filing under	- TILOE.	
	instance and in appointment, obtained it, it is in a second		
з.	If this filing is for an offering under Rule 504 or 505, enter the	o information red	mested for all securities sold by the
٥.	issuer, to date, in offerings of the types indicated, in the twel		-
	this offering. Classify securities by type listed in Part C-Ques		.101 to the 1113t sale of securities if
	chis offering. Classify securities by type fisted in fait c-ques	CION I.	•
		The of	Dollow Drough
	m	Type of	Dollar Amount
	Type of offering	Security	Sold
	Rule 505		\$ <u>N/A</u>
	Regulation A		\$ <u>N/A</u>
	Rule 504	N/A	\$ <u>N/A</u>
	Total	N/A	\$ <u>N/A</u>
	•		
4.	a. Furnish a statement of all expenses in connection with the is	suance and distri	bution of the securities in this
	offering. Exclude amounts relating solely to organization expens	ses of the issuer.	The information may be given as
	subject to future contingencies. If the amount of an expenditure	e is not known, fu	rnish an estimate and check the box to
	the left of the estimate.		
	Transfer Agent's Fees		[x] \$0.00
	Printing and Engraving Costs		[x] \$0.00
	Legal Fees		[x] \$5,000.00
	Accounting Fees		[x] \$0.00
	Engineering Fees		[x] \$0.00
	Sales Commissions (specify finders' fees separately)		[x] \$0.00
			[2] 00.00
	Other Expenses (identify):		[w] én nn
	***************************************		[x] \$0.00
	Mahal		[] 05 000 00
	Total		[x] \$5,000.00

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SEC 1972 (2/97)

	C. OFFERING PRICE, NUMBER OF	INVESTORS, EXPENSES	AND USE	OF PROCEEDS		
	b. Enter the difference between the aggregate	e offering price gi	ven			
	in response to Part C - Question 1 and total	expenses furnished	in			
	response to Part C - Question 4.a. This diffe					
	"adjusted gross proceeds to the issuer."			\$99	5,000.00	
5.	Indicate below the amount of the adjusted grown	_				
	used or proposed to be used for each of the pr					
	amount for any purpose is not known, furnish a					
	box to the left of the estimate. The total of					
	equal the adjusted gross proceeds to the issue Part C - Question 4.b. above.	er set forth in res	ponse to			
			Payments	s to		
			Officers	3,		
			Director Affiliat	•	Payments To	
			ALLILIA	.05	Others	
	Salaries and fees		\$0.0 0	[x]	\$0.00	
	Purchase of real estate	[]	\$0.0 0	[x]	\$0.00	
	Purchase, rental or leasing and installat	tion				
	of machinery and equipment		\$0.00	ixl	\$0.00	
	or manifesty and organization in the control of the		,	,	*****	
	Construction or leasing of plant building	ns .				
	and facilities		\$0.00	[x]	\$0.00	
		^		,	7	
	Acquisition of other businesses (including	na				
	the value of securities involved in this					
	offering that may be used in exchange for					
	assets or securities of another issuer					
	pursuant to a merger)		\$0.00	[x]	\$0.00	
	pursuant to a mergery		φυ.υυ		40.00	
	Repayment of indebtedness		\$0.00	[x]	\$0.00	
	Working capital		\$0.00	[x]	\$995,000.00	
	· · · · · · · · · · · · · · · · · · ·					
	Other (specify):					
	•••		\$0.00	[x]	\$0.00	
			00 00		#00F 000 00	
	Column Totals		\$0.00	[X]	\$995,000.00	
	Total Payments Listed (column totals adde	ed)	ı	[x] \$995,000.00		
		,				
		D. FEDERAL SIGNATU				
	issuer has duly caused this notice to be signed					
Rule	505, the following signature constitutes an un	ndertaking by the i	ssuer to	furnish to the	J.S. Securities and Excha	inge
	ission, upon written request of its staff, the	information furnis	hed by th	e issuer to any	non-accredited investor	
urs	uant to paragraph (b)(2) of Rule 502.					
ssu	er (Print or Type) Diamor	nd A Investors, L.P	•			
	1114 11					- -
ngn	ature Maday Maga					
	The state of the s	 				
ate	5/3/02					
	/30/02					·····
lame	of Signer (Print or Type) Andrew	v E. Shapiro				
7.6 to 7	n of Cinney (Duint on Drawn)	T		roment IIC th	Conomal Dawless of the	
ıtı	e of Signer (Print or Type) Manage	er or Lawndale Capi	tai Manaç	gement, LLC, the	General Partner of the I	ssuer
					•	
					, , , , , , , , , , , , , , , , , , , ,	

-ATTENTION---

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE			
1.	Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any of	Yes	No	
	the disqualification provisions of such rule?	[]	[x]	
	See Appendix, Column 5, for state response.			

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Diamond A Investors, L.P.		
1	/		:
Signature AMMW L. A.	Muca		
Date 2/30/07			
Name of Signer (Print or Type)	Andrew E. Shapiro		
Title of Signer (Print or Type)	Manager of Lawndale Capital Man	nagement, LLC, the Gene	eral Partner of the Issuer

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

- 2	2	3	4				5 Disc	
sell t accred invest in Sta (Part	no non- dited cors ate B -	Type of security and aggregate offering price offered in state (Part C-Item 1)	amount	Type of investor and amount purchased in State (Part C-Item 2)				
Yes	No	Ltd. partnership interests	Number of Accredited Investors	Amount	Number of Non-Accred Investors	Amount	Yes	l No
 	х .	\$0	0	\$0	0	\$0		х
	х	\$0	0 .	\$0	0	\$0		Х
	х	\$0	0	\$0	0	\$0		X
	х	\$0	0	\$0	0	\$0		x
Х		\$1,000,000.00	0	\$0.00	0	\$0.00		x
	х	\$0	0	\$0	0	\$0		х
	х	\$0	0	\$0	0	\$0		х
	х	\$0	0	\$0	0	\$0		х
	х	\$0	0	\$0	0	\$0		x
	х	\$0	0	\$0	0	\$0		X
	х	\$0	0	\$0	0	\$0	1	x
	х	\$0	0	\$0	0	\$0		x
	х	\$0	0	\$0	0	\$0		x
	х	\$0	0	\$0	0	\$0		х
	х	\$0	0	\$0	0	\$0		Х
	х	\$0	0	\$0	0	\$0		х
	Х	\$0	0	\$0	0	\$0		х
	х	\$0	0	\$0	0	\$0		х
	х	\$0	0	\$0	0	\$0		x
	х	\$0	0	\$0	0	\$0	-	х
	Х	\$0	0	\$0	0	\$0	•	x
	х	\$0	0	\$0	0	\$0	 	х
	х	\$0	0	\$0	0	\$0		х
	х	\$0	0	\$0	0	\$0		x
	х	\$0	0	\$0	0	\$0		x
	х	\$0	0	\$0	0	\$0	! !	x
	Intendisell to accredinvestin Statistic (Partitem 1	Intend to sell to non-accredited investors in State (Part B Item 1) Yes No X X X X X X X X X X X X X	Intend to sell to non-accredited investors and aggregate offered in state (Part B - Offered in state (Part B - Offered in state (Part C-Item 1) Yes No Ltd. partnership interests X \$0 X \$0	Intend to sell to non-accredited investors and aggregate offered in state (Part B - Item 1)	Thrend to sell to non-accredited investors and aggregate offered in state offered in state (Part B - Item 1)	Intend to sell to non- scredited investors and aggregate offering price (Fart B - 1cm 1)	Type of security and eggregate offered in state (Part 6 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -	State

<u> </u> 	 Intend	co non- dited cors ate B -	Type of security and aggregate offering price offered in state (Part C-Item 1)	amount	Type of investor and amount purchased in State (Part C-Item 2)					
State	Yes	No	Ltd. partnership interests	Number of Accredited Investors	Amount	Number of Non-Accred Investors	Amount	Yes	No	
MT		х	\$0	0	\$0	[0	\$0		х	
NE		х	\$0	0	\$0	0	\$0	1	х	
NV		х	\$0	0	\$0	0	\$0		Х	
NH		х	\$0	0	\$0	0	\$0		X	
ЪЛ		х	\$0	0	\$0	0	\$0		X	
МИ		х	\$0	0	\$0	0	\$0		Х	
NY		х	\$0	0	\$0	0	\$0		x	
NC		Х	\$0	0	\$0	0	\$0	1	Х	
ND		х	\$0	0	\$0	0	\$0		x	
ОН		х	\$0	0	\$0	0	\$0		Х	
ок		х	\$0	0	\$0	0	\$0		х	
OR		Х	\$0	0	\$0	0	\$0		x	
PA		х	\$0	0	\$0	0	\$0		Х	
RI		х	\$0	0	\$0	0	\$0	<u> </u>	х	
SC		· X	\$0	0	\$0	0	\$0		Х	
SD		х	\$0	0	\$0	0	\$0		Х	
TN		Х	\$0	0	\$0	0	\$0		х	
TX		х	\$0	0	\$0	0	\$0		х	
UT		х	\$0	0	\$0	0	\$0	!	X .	
VT		Х	\$0	0	\$0	0	\$0	-	х	
VA		Х	\$0.	<u> </u>	\$0	0	\$0		x	
WA		х	\$0	0	\$0	0	\$0		X	
WV		х	\$0	0	\$0	0	\$0		x	
WI		х	\$0	0	\$0	0	\$0		X	
WY		х	\$0	0	\$0	0	\$0		x	
PR		х	\$0	0	\$0	0	\$0		x	
				<u> </u>	of 8	l		1	72 (2/9	